

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

COPY

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

Steven Fox

(b) Committee Name:

Friends of Steven Fox

(c) Mailing Address:

P.O. Box 3

Honolulu, HI 96725-0003

(d) Phone (Bus)

808-329-4813

(Res)

808-329-2225

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

☐ 1st Preliminary Primary

☐ Amended

☐ First

☐ Third

☐ 2nd Preliminary Primary

☐ Short Form¹

☒ Final Primary

☐ Preliminary General

☒ Final Election Period

☐ Supplemental

REPORTING PERIOD

10/19/04 through 11/2/04

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ²		0
2. Cash on Hand at the Beginning of this Reporting Period.....	6,455 ³⁵	
3. Total Receipts (From Line 15).....	300 ⁰⁰	50,136 ⁰⁴
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	6,755 ³⁵	50,136 ⁰⁴
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	4,869 ¹²	47,789 ⁸¹
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	1,886 ²³	23,466 ²³
7. Total Loans at the Closing of this Reporting Period.....	35,000 ⁰⁰	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	0	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	0	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	1,886 ²³	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Steven Fox
Candidate Signature

12-2-04
Date

Mary M. Lane
Treasurer Signature

12-2-04
Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.
² Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.
An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
11. Contributions From:		
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties		
(ii) Monetary and Non-Monetary Contributions of \$100 or Less.....	300 ⁰⁰	2461 ⁰⁴
(iii) Monetary and Non-Monetary Contributions of More Than \$100.....	0	4650 ⁰⁰
(iii) Subtotal (Add Lines 11(a)(ii) and 11(a)(iii)).....	300 ⁰⁰	7111 ⁰⁴
(b) Candidate or Candidate's Immediate Family		
(ii) Monetary and Non-Monetary Contributions of \$100 or Less.....	0	25 ⁰⁰
(iii) Monetary and Non-Monetary Contributions of More Than \$100.....	0	8000 ⁰⁰
(iii) Subtotal (Add Lines 11(b)(ii) and 11(b)(iii)).....	0	8025 ⁰⁰
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	300 ⁰⁰	15136 ⁰⁴
13. Public Funds and Other Receipts.....	0	0
14. Loans.....	0	35000 ⁰⁰
15. Total Receipts (Add Lines 12 through 14).....	300 ⁰⁰	50136 ⁰⁴
DISBURSEMENTS		
16. Expenditures.....	4869 ¹²	47,789 ⁸¹
17. Loans Repaid or Forgiven.....	0	0
18. Unpaid Expenditures Paid or Forgiven.....	0	0
19. Subtotal Disbursements (Add Lines 16 through 18).....	4869 ¹²	47,789 ⁸¹
20. Unpaid Expenditures.....	0	
21. Total Disbursements (Add Lines 19 and 20).....	4869 ¹²	47,789 ⁸¹

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

- ☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES
- ☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

Steven Fox
Friends of Steven Fox

PAGE

OF

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION, THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
11/2/04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Contributions of \$100 or less		150 ⁰⁰	
11/17	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Contributions of \$100 ⁰⁰ or less		100 ⁰⁰	
10/6/02	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Contributions of \$100 ⁰⁰ or less		50 ⁰⁰	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

300⁰⁰

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

300⁰⁰

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 2

Steven Fox
Friends of Steven Fox

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OF FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10/20	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>West Hawaii Today</i> <i>PO Box 789</i> <i>Kailua-Kona, HI 96745</i>	<i>Newspaper Ads</i>	<i>2178³⁴</i>
10/20	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>SkyNet Hawaii</i> <i>74-5605 Luhia St., #B-7</i> <i>Kailua-Kona, HI 96740</i>	<i>Radio Spots</i>	<i>1050²⁰</i>
10/20	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>SkyNet Hawaii</i>	<i>Radio Spots</i>	<i>6458</i>
10/22	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Pay Pal</i>	<i>BANK CHG</i>	<i>175</i>
10/25	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>U.S. Postmaster</i>	<i>Stamps</i>	<i>46⁰⁰</i>
10/27	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>SkyNet Hawaii</i>	<i>Radio Ads</i>	<i>43750</i>
10/27	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>West Hawaii Today</i>	<i>Newspaper Ads</i>	<i>716⁰⁴</i>

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....

4494²¹

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

4494²¹

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 2

STEVEN FOX
Friends of Steven Fox

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
<i>11/5</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>WAIKOLA VILLAGE ASSOC</i> <i>P.O. Box 383910</i> <i>WAIKOLA, HI 96738</i>	<i>Ads</i>	<i>11971</i>
<i>11/8</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Trade Wind Consulting</i> <i>77-187 Mahiehe St.</i> <i>Kailua, Kona, HI 96740</i>	<i>Ad</i>	<i>25570</i>
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....

37491

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

486912